PTO/SB/06 (08-03)

Approved for use through 7/31/2006. OMB 0651-0032 Under the Paperwork Réduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE PATENT APPLICATION FEE DETERMINATION RECORD Application or/Docket Number 04/55% Substitute for Form PTO-875 n CLAIMS AS FILED - PART I OTHER THAN (Column 1) (Column 2) SMALL ENTITY OR SMALL ENTITY FOR NUMBER FILED NUMBER EXTRA BASIC FEE RATE FEE RATE FEE (37 CFR 1.16(a)) OR **TOTAL CLAIMS** (37 CFR 1.16(c)) minus 20 = X S INDEPENDENT CLAIMS OR (37 CFR 1.16(b)) minus 3 ≈ X \$ OR X S MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d)) OR = * If the difference in column 1 is less than zero, enter "0" in column 2. TOTAL OR TOTAL CLAIMS AS AMENDED - PART II (Column 1) (Column 2) OR OTHER THAN (Column 3) SMALL ENTITY SMALL ENTITY CLAIMS HIGHEST REMAINING NUMBER PRESENT RATE ENT ADDI-RATE **AFTER** ADDI-**PREVIOUSLY EXTRA** TIONAL AMENDMENT TIONAL PAID FOR FEE Total (37 CFR 1.16(c)) FEE Minus ENDM OR Independent (37 CFR 1.16(b)) Minus X S OR X \$ FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR + 5 TOTAL TOTAL ADD'L FEE OR ADD'L FEE (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST ω REMAINING NUMBER PRESENT ENT RATE ADDI-RATE **AFTER** ADDI-**PREVIOUSLY EXTRA** TIONAL AMENDMENT TIONAL PAID FOR FFF Total FEE ENDM Minus -(37 CFR 1.16(c)) X \$ OR X S Independent (37 CFR 1.16(b)) Minus OR X S FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR TOTAL TOTAL ADD'L FEE OR ADD'I FFF (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST \mathbf{O} REMAINING PRESENT NUMBER RATE ENDMENT ADDI-RATE ADDI-**AFTER** PREVIOUSLY **EXTRA** TIONAL TIONAL AMENDMENT PAID FOR FEE FEE Total Minus = (37 CFR 1.16(c)) x s OR X \$ Independent (37 CFR 1.16(b)) Minus ¥ X 9 = OR x s = FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR TOTAL TOTAL ADD'L FEE If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". OR ADD'L FEE

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

10/04/556

Application or Docket Number

33827-45-00

PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2001

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE		OR	OTHER SMALL		
TOTAL CLAIMS			12 .					RATE	FEE		RATE	FEE	Í
FO	R		NUMBER FILED		NUMBER EXTRA			BASIC FEE	370.00	OR	BASIC FEE	740.00	
то	TAL CHARGEA	BLE CLAIMS	12 minus 20=		• O.			X\$ 9=		OR	X\$18=		
IND	EPENDENT CL	AIMS	(minus 3 =		* 0			X42=	·	OR	X84=		
MULTIPLE DEPENDENT CLAIM PRESENT								+140=		OR	+280=	· ·	
* If the difference in column 1 is less than zero, enter "0" in column 2								TOTAL		OR	TOTAL	740	
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							<u>L</u>	SMALL	ENTITY	OR	OTHER SMALL		
AMENDMENTA		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	DW HILL
	Total	• 12	Minus	** 2		- Ø		X\$ 9=		OR	X\$18=		NA WAY
	Independent	* /	Minus		3	₽		X42=		OR	X84=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+140=.		OR	+280=		
								TOTAL ADDIT, FEE		OR	TOTAL ADDIT, FEE		֓֞֜֞֜֞֜֞֜֞֜֜֜֜֞֜֡֓֓֓֡֓֡֡֡
(Column 1) (Column 2) (Column 3)									· 	3	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE	٠	RATE	ADDI- TIONAL FEE	
	Total	• 12	Minus	** 2		= Ø		X\$ 9=		OR	X\$18=		
	Independent	*]	Minus		3	<u>-</u>]	X42=		OR	X84=	. \	
	FIRST PRESE	NTATION OF MI	JLTIPLE DEF	ENDEN	CLAIM			+140=		OR	+280=) _a	
								TOTAL ADDIT, FEE		OR	TOTAL ADDIT, FEE		╢
		(Column 1)		(Colu	mn 2)	(Column 3))	ADDII. FEE C		•	ADDIT. I CE		1
ENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI	IEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
200	Total	* 12	Minus	** c	20	- 🛭		X\$ 9=		OR	X\$18=	\	
AMENDMENT	Independent	*	Minus	***	3	*		X42=		OR	X84=		
L	FIRST PRESE	NTATION OF M	JETIPLE DEF	PENDEN	TCLAIM		ال	.140-			1380-		1
**	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. * If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." * TOTAL ADDIT. FEE ADDIT. FEE The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												

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